

2700 INTERNAL TRANSFER REQUEST FOR S.N.

10/02/0172

DATE: 8/14/02	FROM: P. Sobutka (print name)
FORWARD TO: A. Att Unit: <input checked="" type="checkbox"/> B. Class: <input checked="" type="checkbox"/> 379 C. Subclass: <input checked="" type="checkbox"/> 406.01	REASON(S): A. You had Parent <input checked="" type="checkbox"/> B. See Title <input checked="" type="checkbox"/> C. See Abstract <input checked="" type="checkbox"/> D. See Claim(s): <input checked="" type="checkbox"/> 17

FURTHER EXPLANATION IF NEEDED:

Echo Cancellation for wireline. No Radio telephone or
Wireless claimed for 455.

DATE: _____	FROM: _____ (print name)
FORWARD TO: A. Att Unit: _____ B. Class: _____ C. Subclass: _____	REASON(S): A. You had Parent <input checked="" type="checkbox"/> B. See Title <input checked="" type="checkbox"/> C. See Abstract <input checked="" type="checkbox"/> D. See Claim(s): <input checked="" type="checkbox"/>

FURTHER EXPLANATION IF NEEDED:

DATE: _____	FROM: _____ (print name)
FORWARD TO CLASSIFIER [REDACTED]	REASON(S): A. You had Parent <input checked="" type="checkbox"/> B. See Title <input checked="" type="checkbox"/> C. See Abstract <input checked="" type="checkbox"/> D. See Claim(s): <input checked="" type="checkbox"/>

FURTHER EXPLANATION IF NEEDED:

DISPOSITION BY 2700 CLASSIFICATION	CLASSIFIER: _____
DATE: _____	REASON(S): A. You had Parent <input checked="" type="checkbox"/> B. See Title <input checked="" type="checkbox"/> C. See Abstract <input checked="" type="checkbox"/> D. See Claim(s): <input checked="" type="checkbox"/>
FORWARD TO: A. Att Unit: _____ B. Class: _____ C. Subclass: _____	

FURTHER EXPLANATION IF NEEDED: